PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/826,667

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Column 1)		(Column 2)		١ ،	TYPE [OR			
TOTAL CLAIMS			20					RATE	FEE	↓ .	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			7 minus 3 =					X43=		OR	X86=		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT	ESENT				+145=		OR	+290=		
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	1	TOTAL	38T-	OR	TOTAL		
	CLAIMS AS AMENDED - PART II										OTHER	THAN	
	• :	(Column 1)		(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	<u> </u>		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-	OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)											ADDII. FEET		
		CLAIMS		HIGHE	ST	(Column o)	lг		ADDI-	1 1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**	·	=		X\$ 9=		OR	.X\$18=		
	Independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
								TOTAL			TOTAL		
ADDIT. FEE												•	
-	•	(Column 1) CLAIMS		(Colum		(Column 3)							
AMENDMENT C	•	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
						_		+145=		OR	+290=	·	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT. FEE		
		mber Previously Pa ber Previously Paid						DDIT. FEE L	ropriate box		•		